

DECLARATION FOR ORIGINAL U.S. PATENT APPLICATION



Attorney's Docket No. GCENP006

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **TECHNIQUES FOR PROVIDING INTEROPERABILITY AS A SERVICE**, the specification of which,

- (check one)
1. ☐ is attached hereto.
 2. ☒ was filed on April 7, 2004 as
U.S. Application No. 10/820,650
and was amended on _____.
 3. ☐ was filed on _____ as
International PCT Application Serial No. _____
and was amended on _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, CFR §1.56.

Prior Foreign Application(s)

I hereby claim foreign priority benefits under Title 35, United States code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

			Priority Benefits Claimed?	
			Yes	No
_____ (Appl. No.)	_____ (Country)	_____ (Date Filed- Day/Month/Year)	____	____
_____ (Appl. No.)	_____ (Country)	_____ (Date Filed- Day/Month/Year)	____	____

Provisional Application(s)

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below:

_____ (Application No.)	_____ (Filing Date)
_____ (Application No.)	_____ (Filing Date)

Prior U.S. Application(s)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this applications is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

_____ (Application No.)	_____ (Filing Date)	_____ (Status - patented, pending, abandoned)
_____ (Application No.)	_____ (Filing Date)	_____ (Status - patented, pending, abandoned)

Atty. Dkt. No.: GCENP006

Send Correspondence To:

Customer Number: 022434

022434

Direct Telephone Calls To:

Joseph M. Villeneuve at telephone number (510) 843-6200

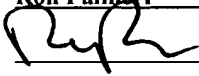
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Typewritten Full Name of
Sole or First Inventor:

Ron Palmeri

Citizenship: U.S.

Inventor's signature:



Date of Signature: 8/19/04

Residence: (City) Berkeley

(State/Country) California/U.S.

Post Office Address: 985 Santa Barbara Road, Berkelev, CA 94707

Full Name of Second Joint
Inventor (if any):

David Byrne Reese

Citizenship: U.S.

Inventor's signature:

Date of Signature: _____

Residence: (City) Oakland

(State/Country) California/U.S.

Post Office Address: 755 Walker Avenue, Oakland, California 94610

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			Priority Benefits Claimed?
_____ (Appl. No.)	_____ (Country)	_____ (Date Filed- Day/Month/Year)	___ Yes ___ No
_____ (Appl. No.)	_____ (Country)	_____ (Date Filed- Day/Month/Year)	___ Yes ___ No

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Typewritten Full Name of

Sole or First Inventor: Ron Palmeri

Citizenship: U.S.

Inventor's signature: _____

Date of Signature: _____

Residence: (City) _____

(State/Country) California/U.S.

Post Office Address: _____

Full Name of Second Joint
Inventor (if any):

David Byrne Reese

Citizenship: U.S.

Inventor's signature: 

Date of Signature: 13 Sept 2004

Residence: (City) Oakland

(State/Country) California/U.S.

Post Office Address: 755 Walker Avenue, Oakland, California 94610